MEDICAID INFORMATION RELEASE MA03-89

TO: Developmental Disabilities Agencies, Targeted Service Coordination

Agencies, and ISSH and DD Waiver Services Providers

FROM: Kathleen P. Allyn, Deputy Administrator

Division of Medicaid

SUBJECT: NEW SERVICES AND BILLING CODES FOR ADULTS WITH

DEVELOPMENTAL DISABILITIES

Community Crisis Supports is a new service available to Adults with Developmental Disabilities beginning October 20, 2003. Community Crisis Supports includes intervention for a participant in a crisis situation to ensure their health and safety or prevent hospitalization or incarceration. Crisis situations may include: loss of housing, employment or reduction of income, risk of incarceration, risk of physical harm, family altercation or other emergencies. This service must be authorized prior to billing. It may be authorized the following business day after the intervention if there is a documented need for immediate intervention and no other means of support is available and the services are appropriate to rectify the crisis. This service is limited to a maximum of 80 units (20 hours) per crisis, for 5 consecutive days. Community Crisis Supports may be provided by Targeted Service Coordinators, Plan Developers, Plan Monitors, Developmental Disability Agencies, Community Supported Employment agencies, Residential Habilitation Agencies, Certified Family Home/Residential Habilitation Providers, Adult Day Care Providers, Respite Providers, Nursing Service Providers, or Behavior Consultation Providers. Community Crisis Supports is billed with code H2011 and reimbursed at \$11.02 per 15 minute unit.

Plan Development is a new service that allows for hourly payment for plan development. It must be provided by a Targeted Service Coordinator. The plan developer is chosen by the participant and may be reimbursed for participation in the budget negotiation meeting, facilitating the person centered planning meeting, writing the plan of service and any subsequent addenda. The billing code is G9007. **This is effective for dates of service on or after November 1, 2003,** and may be used for development of plans that are developed using the new Adult DD Care Management business model. This service must be **authorized prior to billing.** It is reimbursed at \$10.00 per 15 minute unit and is limited to 48 units (12 hours) per calendar year.

State code 8253A (ISP Development) will no longer be effective for billing for date of service on or after April 1, 2004. All initial and annual plans developed on or after March 1, 2004, will be reimbursed when billed using code G9007 - Plan Development.

Plan Monitoring is a new service that allows for hourly payment for monitoring of the plan when the participant does not have a Targeted Service Coordinator. It is effective for dates of service on or after November 1, 2003. Reimbursable activities include: discussion of the plan of service in a face-to-face contact with the participant or legal representative to identify current status of programs and changes if needed; contact with service providers to identify barriers to service provision; discuss participant satisfaction regarding quality and quantity of service; and review of provider status reports to complete the plan monitor summary. The service code is G9012 and may be used to monitor plans that have been developed using the Adult DD Care Management business model. It is reimbursed at \$10.00 per 15 minute unit. This service is limited to 32 units (8 hours) per calendar year. If the participant chooses a Targeted Service Coordinator to do plan monitoring, the monthly rate paid to Service Coordinators includes this function; therefore, plan monitoring cannot be billed as a separate service.

If you have any questions please contact Jean Christensen at 364-1828.

Thank you for your continued participation in the Idaho Medicaid Program.

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